



CALIFORNIA FORM

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STATEMENT OF ECONOMIC INTERESTS

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rease type of print in link.	2012 MAD 1	
NAME OF FILER (LAST)	(First): Art 11: 50	(MIDDLE)
Myrick Ja	ael	P
1. Office, Agency, or Court		~.
Agency Name	<u> </u>	2 00
City of Richmond		CITY CUTY C
Division, Board, Department, District, if applicable	Your Position	<b>75</b> - CH
City Council	Councilmember	め 空楽円
► If filing for multiple positions, list below or on an attachment.	·	M M M M
, <b>g</b>	I	<b>F</b> SEC
Agency:	Position:	
2 Jurisdiction of Office (Cheek at least are how)		<u> </u>
2. Jurisdiction of Office (Check at least one box)		
☐ State	Judge or Court Commissioner (State	,
Multi-County	·	
☑ City of Richmond	Other	
2. Time of Statement (St. 1)		
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2012, through December 31, 2012.	Leaving Office: Date Left/ (Check one)	
-or- The period covered is/, through		1. 2012, through the date of
December 31, 2012.	leaving office.	i, zo iz, anough mo dato of
Assuming Office: Date assumed 02 , 05 , 2013	The period covered is/_ the date of leaving office.	, through
Candidate: Election year and office sough	nt, if different than Part 1:	
4. Schedule Summary		
Check applicable schedules or "None." ► To	otal number of pages including this co	over page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business	s Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule	
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Pa	
-or-		
None - No reportable in	nterests on any schedule	
5		
herein and in any attached schedules is true and complete. I ack		
I certify under penalty of perjury under the laws of the State of		
Date Signed 3/5/13		
(month, day, year)		

FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



**Positions**(Other than Gifts and Travel Payments)

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES CO	DMMISSION
Name	

1. INCOME RECEIVED	► 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME ASTERMANY	NAME OF SOURCE OF INCOME	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE  SCATOR FICE DEDICES COLOUTE SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED	
\$1,001 - \$10,000 S10,000 S10,000 S10,000 S10,000 S10,000 S10,000 S10,000 S10,000 S10,000	\$500 - \$1,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary   Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income	
Loan repayment Partnership	☐ Loan repayment ☐ Partnership	
Sale of(Real property, car, boat, etc.)	Sale of(Real property, car, boat, etc.)	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more	
Other(Describe)	Other(Describe)	
retail installment or credit card transaction, made in the members of the public without regard to your official startegular course of business must be disclosed as follow	ending institutions, or any indebtedness created as part of e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's as:	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)	
ADDRESS (Business Address Acceptable)	%None	
	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence	
	Real Property	
HIGHEST BALANCE DURING REPORTING PERIOD		
\$500 - \$1,000	City	
\$1,001 - \$10,000 \$10,001 - \$100,000	Guarantor	
OVER \$100,000	_	
_ 3.2 4.00,000	Other(Describe)	
Comments:		

## SCHEDULE D Income - Gifts

CALIFORNIA FORM	
Name	

▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
124A Washington Ave, Richmonsian	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
125,13:75 Jongtion to Paster	
Childs College	
FUND	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$	
Comments:	